

**MULTIPLE DEPENDENT IM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

APPLICANT(S)

491343

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			•		•		•	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51	/					
2							52	/					
3							53						
4							54						
5							55	/					
6							56	/					
7							57						
8							58						
9							59						
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14							64						
15							65						
16							66						
17							67						
18							68						
19							69						
20							70						
21							71	/					
22							72	/					
23	/						73						
24	/						74						
25	/						75						
26							76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82	/					
33							83	/					
34	/						84						
35	/						85						
36	/						86						
37	/						87						
38	/						88						
39	/						89						
40	/						90						
41	/						91						
42	/						92						
43							93						
44							94	/					
45							95	/					
46							96						
47							97						
48							98						
49							99						
50							100						
T TAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
T TAL CLAIMS							TOTAL CLAIMS						

BEST AVAILABLE COPY

FEE CALCULATION SHEET
(FOR USE WITH FO 10-81)

APPLICANT(S)

AIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101						
102						
103						
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150						
TOTAL IND.	16					
TOTAL DEP.	96					
TOTAL CLAIMS	112					

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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